

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	UT	69007	8/31/99
O.I.P.E. CLASSIFIER		59	9/3
FORMALITY REVIEW		69833	9/16/99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	1	11/20/01	11/20/01
2	2	11/20/01	11/20/01
3	3	11/20/01	11/20/01
4	4	11/20/01	11/20/01
5	5	11/20/01	11/20/01
6	6	11/20/01	11/20/01
7	7	11/20/01	11/20/01
8	8	11/20/01	11/20/01
9	9	11/20/01	11/20/01
10	10	11/20/01	11/20/01
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12	12	11/20/01	11/20/01
13	13	11/20/01	11/20/01
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15	15	11/20/01	11/20/01
16	16	11/20/01	11/20/01
17	17	11/20/01	11/20/01
18	18	11/20/01	11/20/01
19	19	11/20/01	11/20/01
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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